#### APPROVAL OF CONSENT AGENDA

## TOWN OF DAVIE TOWN COUNCIL AGENDA REPORT

**TO:** Mayor and Councilmembers

**FROM/PHONE:** Giovanni Moss, Director, Housing and Community Development,

954-797-1226

**PREPARED BY:** Burton Spiwak, Programs Specialist, Housing and Community

Development

SUBJECT: Resolution authorizing the Mayor to execute a Service Provider

Agreement with Land Design South of Florida, Inc. and MS5L, Inc for Phase I

Environmental Assessment services.

**AFFECTED DISTRICT:** Town Wide

**ITEM REQUEST:** Schedule for Council Meeting

TITLE OF AGENDA ITEM: SELECTION - A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, SELECTING LAND DESIGN SOUTH OF FLORIDA, INC. AND MS5L, INC. TO PROVIDE PHASE I ENVIRONMENTAL ASSESSMENT SERVICES FOR THE NEIGHBORHOOD STABILIZATION PROGRAM (NSP) AND AUTHORIZING THE TOWN ADMINISTRATOR OR HIS DESIGNEE TO NEGOTIATE AN AGREEMENT FOR SUCH SERVICES

REPORT IN BRIEF: The Town solicited bids to provide Phase I Environmental Assessment services required by DCA under the Neighborhood Stabilization Program (NSP). The solicitation was advertised statewide in Florida Bid Reporting and nationally in BidNet and also posted on the Town's website. The Housing and Community Development Department has concurred with the Town's NSP Consultant's in the ranking of Land Design South of Florida, Inc. and MS5L, Inc. as the firms submitting the lowest bids to provide the required services. Due to the fact the Town is selecting two firms for this service the discount (based on receiving all environmental assessment) provided by MS5L, Inc will not apply. Upon approval of this resolution, the negotiation team will begin negotiating contracts with the selected firms and present those agreements for approval at a future meeting date.

**PREVIOUS ACTIONS:** Resolution R-2009-71 approved on April 1, 2009 authorizing the Mayor to execute an Application and Housing Assistance Plan requesting \$2,316,292 in NSP funds; Ordinance 2009-13, approved on May 20, 2009 approved the budget amendment providing the funding for the NSP Program.

#### **CONCURRENCES:**

#### FISCAL IMPACT: Yes

Has request been budgeted? Yes

If yes, expected cost: To be negotiated with selected firms

Account name and number: NSP Contractual Services - 011-1607-554-

03.06

If no, amount needed: \$

What account name and number will funds be appropriated from:

Additional Comments:

**RECOMMENDATION(S):** Motion to approve resolution

**Attachment(s):** Resolution, Procurement Authorization, Bid Opening Report, Incorporation Information, NSP Consultant's Recommendation Letter

RESOLUTION	
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A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, SELECTING LAND DESIGN SOUTH OF FLORIDA, INC. AND MS5L, INC. TO PROVIDE PHASE I ENVIRONMENTAL ASSESSMENT SERVICES FOR THE NEIGHBORHOOD STABILIZATION PROGRAM (NSP) AND AUTHORIZING THE TOWN ADMINISTRATOR OR HIS DESIGNEE TO NEGOTIATE AN AGREEMENT FOR SUCH SERVICES.

WHEREAS, the Town solicited bids to provide Phase I Environmental Assessment services for the Neighborhood Stabilization Program; and

WHEREAS, the Housing and Community Development Department has concurred with the Town's NSP Consultant in the ranking of Land Design South of Florida, Inc. and MS5L, Inc. as the two firms submitting the lowest bids to provide the required services; and

WHEREAS, it is in the best interest of the Town of Davie to execute a contract for such services; and

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWN OF DAVIE, FLORIDA:

SECTION 1. The Town Council of the Town of Davie does hereby accept the selection of Land Design South of Florida, Inc. and MS5L, Inc. as the firms with the lowest bids to provide the required services and authorizes the Town Administrator or his designee to negotiate an agreement for such services and present that contract for approval at a future meeting date. Should no agreement be reached with the lowest bid firms, then the Town Administrator or his designee shall negotiate with the next lowest bid firm and present that agreement for approval.

SECTION 2. This Resolution shall take effect immediately upon its passage and
adoption.
PASSED AND ADOPTED THIS DAY OF, 2010
MAYOR/COUNCILMEMBER
ATTEST:
TOWN CLERK
APPROVED THIS DAY OF, 2010

# TOWN OF DAVIE PROCUREMENT AUTHORIZATION

ACCOUNT NUMBER. BUDGET ITEM & DE 011-1607-554-03.06 NSP Phase I Environmental	Assessment Services Provider Determined by Bid
METHOD OF PROCUREMENT (check the one that  X Open Competitive Bidding Piggyback on Contract Number Sole Source or Single Source Request For Proposals	at applies)
SPECIFICATIONS & LIST OF VENDORS MUST I	BE ATTACHED
Si	Department Head  No Ameunt
H	ave Funds been Reserved NA SPECIFIED
	ate/ <i>\$\\21\\09</i> _Signed
S	igned Jany Shipmin Town Administrator
BIDS S	UBMITTED
VENDOR	COST
- 12	
ATTACH ED	CAF
BIP	ATTACHES
OFENING-	BIP
REPART	TABULATION
	Signed / hulf hym Procurement Manager
BID SPECIFICATION COM	MITTEE'S RECOMMENDATION
Vendor	Cost
LAND DIRECTED SOUTH	8850/ASSESSMENT

#### BID OPENING REPORT

BID NUMBER: 18-09-152		11.24.09
ESTIMATED COST: MO OMOUNT.	Spendien by	Department
NO. CONTRACTOR'S NAME	BID AMOUNT	COMMERCIAL RANKING
1. OSA South has	1400 00	
2. Jandleign Jath	850.00	
3. Marie En inormande	1500.00	12 (TIE)
4. SEND	1250.00	6 (718)
5. Ill Association	1800.00	15 (TIB)
6. air Quest Environ.	1250.00	6 (nE)
7. MS5L, Inc.	950.00	2
8. The Chappell Group	2500.00	22
9. Environmental Services	1500.00	12(T/E)
10. GFA International	1600.00	3
REMARKS		
SPECS SENT DO FIFTY	SEVEN (57) PROSPS	CTIVE BIDDERS
TOWN RELD TWENTY		
NOTE: THE ABOVE BID AMOUNTS H SUBJECT TO CORRECTION AFTER TH	AVE NOT BEEN CHECKE E BIDS HAVE BEEN COMI	D, AND BID TOTALS ARE PLETELY REVIEWED.
THIS IS ONLY A FINANCIAL RANKIN DEPARTMENT IS RESPONSIBLE FOR I THE BID SPECIFICATIONS PRIOR TO	REVIEWING THE BIDS FO	R COMPLIANCE WITH ALL
PURCHASING OFFICIAL: /hulfyn		DATE: 11/24/09
WITNESS: Augie Saluras	<b>)</b>	DATE: 11/24/09 DATE: 11.24.09

#### BID OPENING REPORT

	IAME: <u>Phase   Environ</u> n IUMBER: <u>B-09-152</u>	nental	TIME: 2:11pm DATE: 11:24.09
ESTIM	MATED COST: NA		
NO.	CONTRACTOR'S NAME	BID AMOUNT	COMMERCIAL RANKING
1.	MacTec Eng.	2750.00	23
2.	REP associates	1350.00	6 (TIB)
3.	Sphere Environ	1275.00	9
4.	Miller Legg	1800.00	15(110)
5.	Nova Engineering	1200 00	5
6.	T.Y. Lin International	2400.00	2/
7.	Langan Eng.	2106.00	18
8.	Nutting Environ	1300,00	10
9.	Dunkelberger Eng.	1700.00	14
10.	EPAC Environ.	1100.00	4
REMAR	RKS		

NOTE: THE ABOVE BID AMOUNTS HAVE NOT BEEN CHECKED, AND BID TOTALS ARE SUBJECT TO CORRECTION AFTER THE BIDS HAVE BEEN COMPLETELY REVIEWED.

THIS IS ONLY A FINANCIAL RANKING OF ALL THE BIDS RECEIVED. THE USING DEPARTMENT IS RESPONSIBLE FOR REVIEWING THE BIDS FOR COMPLIANCE WITH ALL THE BID SPECIFICATIONS PRIOR TO SUBMITTAL OF LETTER OF RECOMMENDATION.

PURCHASING OFFICIAL:	hul	ma
WITNESS: Quyla	Sali	ics

DATE: 11/24/09

DATE: 11.24.09

#### BID OPENING REPORT

BID N	AME: Phase 1 Coviconner	rtal TIME:_	2:11pm
BID N	имвек: <u>В-09-152</u>	DATE:	11.24-09
ESTIM	MATED COST:		
NO.	CONTRACTOR'S NAME	BID AMOUNT	COMMERCIAL RANKING
٠.,			<u> </u>
1.	Thompson & associates	1800.00	15 (TIE)
2.>	Thompson ! associates UNIVERSAL ENG. SUES. BUTEAU VERIHAS NA	3300.00	15 (715)
3.	Bureau Vieritas NA	2390.00	20
4.			
5.			
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8.			
9.			:
10.			
REMA	rks		
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SI	OTE: THE ABOVE BID AMOUNTS H. UBJECT TO CORRECTION AFTER THI HIS IS ONLY A FINANCIAL RANKIN	E BIDS HAVE BEEN COMI	PLETELY REVIEWED.
D	EPARTMENT IS RESPONSIBLE FOR F HE BID SPECIFICATIONS PRIOR TO	REVIEWING THE BIDS FO	R COMPLIANCE WITH ALL
PURC	HASING OFFICIAL: Hull Hy	n	DATE: 1/24/09
WITN	ESS: (Jugie Valeur)	· ,	DATE: 11- 24109

Form (Rev. November 2005)
Department of the Treasury

## Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

ge 2.	Name (as shown on your income tax leturn) Land Design South of Florida, Inc.				
a6ed uo i	Business name, il different from above				
r type ictions	Check appropriate box: Sole proprietor	·		Exempt to withholds	rom backup ng
Print or type See Specific Instructions	Address (number, street, and apt. or suite no.) 2101 Centrepark West Dr., Suite 100	Requester's	name and	address (optional)	}
pecific	City, state, and ZiP code West Palm Beach, FL 33409				
See 5	List account number(s) here (optional)				
₽aı	Taxpayer Identification Number (TIN)				
back alien	your TIN in the appropriate box. The TIN provided must match the name given on Line 1 up withholding. For individuals, this is your social security number (SSN). However, for a resole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entite employer identification number (EIN). If you do not have a number, see How to get a TIN or	sident ies, it is	Social seci	arity number	
Note	. If the account is in more than one name, see the chart on page 4 for guidelines on whoseer to enter.	e i	Employer i 6  5 40	7   5   9   5	
₽aı	t II Certification				
	r penalties of perjury, I certify that:				
1. 7	he number shown on this form is my correct taxpayer identification number (or I am waitin	g for a numb	per to be in	sued to me), a	ınd
F	arn not subject to backup withholding because: (a) I am exempt from backup withholding, tevenue Service (IRS) that I am subject to backup withholding as a result of a failure to rep otified me that I am no longer subject to backup withholding, and	or (b) I have on all interes	not been at or divide	notified by the ends, or (c) the	internal IRS has
	am a U.S. person (including a U.S. resident alien).				
withh	fication instructions. You must cross out item 2 above if you have been notified by the IF tolding because you have failed to report all interest and dividends on your tax return. For the design of the interest page in the property cancellation of deligned instructions and the property cancellation of deligned instructions.	real estate tr	ansactions	i, item 2 does i	nat apply.

arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must

Purpose of Form

Signature of U.S. person >

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mongage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

provide your correct TIN. (See the instructions on page 4.)

U.S. person, Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
  - 2. Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any pannership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note, If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States.
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

The U.S. owner of a disregarded entity and not the entity,

#### Town of Davie Vendor/Bidder Disclosure

I, Jerry Renick , being first duly swon The full legal name and business address of the pers Town of Davie ("Town") are as follows (Post Office	son(s) or entity contracting with the
N. C. Paidwal Firm on Organization:	Land Design South of Flori

Name of Individual, Firm, or Organization:	Land Design South of Florida, Inc.
Address:	2101 Centrepark W. Dr., Suite 100
. · · · · ·	West Palm Beach, FL 33409
FEIN	65075955
State and date of incorporation	FL, April 29, 2007

#### OWNERSHIP DISCLOSURE AFFIDAVIT

1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):

Names, Addresses, and Titles of Individual Who Will Lobby:

Fuil Legal Name 2101	Address Owns Centrepark W. Dr., Suite 10	00 .
Karen F. Bentz West	Palm Beach, FL 33409	60 %
Robert A. Bentz	Same	14_%
Jennifer M. Tighe	Same	10 %
Gerald W. Renick	Same	8 %
Bradley J. Currie	Same	88

Full Legal Name	Address
By Jerry Reno Signature of Affiant	Date: Move ber
Jerry Renick Print Name	
SUBSCRIBED AND SWO  No very Dec 200  personally known to me or identification.	
gwwwig	Notary Public, State of Florida al
	Y COMMISSION # DD499435 EXPIRES: March 21, 2010 FI. Notary Discount Assoc. Co.

## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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### **Detail by Entity Name**

#### Florida Profit Corporation

LAND DESIGN SOUTH OF FLORIDA, INC.

#### Filing Information

Document Number P97000039725

FEI/EIN Number

650759555

**Date Filed** 

05/01/1997

State

FL

**Status** 

**ACTIVE** 

Effective Date

04/29/1997

Last Event

**AMENDMENT** 

Event Date Filed

12/29/2005

**Event Effective Date NONE** 

#### **Principal Address**

2101 CENTREPARK WEST DRIVE

SUITE 100

WEST PALM BEACH FL 33409 US

Changed 10/14/2002

#### Mailing Address

2101 CENTREPARK WEST DRIVE

SUITE 100

WEST PALM BEACH FL 33409 US

Changed 10/14/2002

#### Registered Agent Name & Address

BENTZ, ROBERT A

2101 CENTREPARK W DR

WEST PALM BEACH FL 33409 US

Name Changed: 04/30/2009

Address Changed: 04/30/2009

#### Officer/Director Detail

#### Name & Address

Title ST

BENTZ, ROBERT A 2101 CENTREPARK WEST DRIVE 100 WEST PALM BEACH FL 33409 US

Title PD

BENTZ, KAREN F 2101 CENTREPARK WEST DRIVE 100 WEST PALM BEACH FL 33409 US

Title VP

TIGHE, JENNIFER M 2101 CENTREPARK WEST DRIVE 100 WEST PALM BEACH FL 33409 US

Title VP

CURRIE, BRADLEY J 2101 CENTREPARK WEST DRIVE 100 WEST PALM BEACH FL 33409 US

Title VP

RENICK, GERALD W 2101 CENTREPARK WEST DRIVE 100 WEST PALM BEACH FL 33409 US

Title VP

ORTEGA, JUAN F 2101 CENTREPARK WEST DRIVE 100 WEST PALM BEACH FL 33409 US

#### **Annual Reports**

#### Report Year Filed Date

 2007
 04/12/2007

 2008
 04/30/2008

 2009
 04/30/2009

#### **Document Images**

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W-9 (Rev. November 2005)

#### Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

inserna!	Revenue Service	
page 2.	Name (as shown on you: incurne tax return)  MS <5 L Fh(:	
5	Business name, it different from above	
Print or type : Instructions	Check appropriate box: ☐ Individual Solie proprietor ☐ Corporation ☐ Partnership ☐ Other ►	Exempt from backup withholding
= =	Address (number, street, and apt. or suite no.) Request	er's name and address (optional)
돌등	5781 SW 7 St.	
Ę.	City, state, and ZIP code	
Specific	Plantation PL 33317	
See S	List account number(s) here (optional)	
₽ari	Taxpayer Identification Number (TIN)	
backu	your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid p withholding. For individuals, this is your social security number (SSN), However, for a resident	Social Escurity number
	sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is imployer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3.	3. <b>or</b>
	If the account is in more than one name, see the chart on page 4 for guidelines on whose er to enter.	Employer identification number 20+8 7 3 3 4 4 7
Part	II Certification	
Under	penalties of perjury, I certify that:	

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the internal Revenue Service (iRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the iRS has notified me that I am no longer subject to backup withholding, and
- 3. I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest peid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here Signature of U.S. person >

#### Purpose of Form

A person who is required to file an information return with the A person who is required to the art information return wanter IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mongage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting if (the requester) and, when applicable, to:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- 2. Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee.
- In 3 above, if applicable, you are also certifying that as a U.S. trade or husiness is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you

· An individual who is a citizen or resident of the United States,

11/24/09

- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of to pay a withholding tax on any foreign partners' share of income from such business. Further, in cenain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of garangeribin recome. share of partnership income.

The person who gives Form W-9 to the partnership to: purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

. The U.S. owner of a disregarded entity and not the entity,

Cat No. 102301X

Lorm W-9 (New 11 2005.

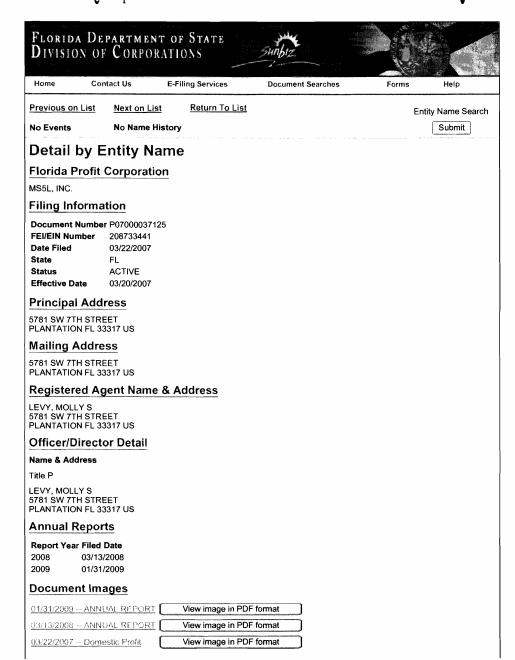
#### Town of Davie Vendor/Bidder Disclosure

FEIN  State and date of incorporation  Flexida Cos feq  OWNERSHIP DISCLOSURE AFFIDAVIT  1. If the contract or business transaction is with a corporation, the full legal name a business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):  Names, Addresses, and Titles of Individual Who Will Lobby:  Full Legal Name  Address  Ownership  Molly Levy  Plantaben, Fi 100	Name of Indivi	dual, Firm, or Orga	anization:	MSSL	Inc	
State and date of incorporation  Florida C3/69  OWNERSHIP DISCLOSURE AFFIDAVIT  1. If the contract or business transaction is with a corporation, the full legal name a business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):  Names, Addresses, and Titles of Individual Who Will Lobby:  Full Legal Name  Address  Ownership	Address:			5781 51	27.5t.	
OWNERSHIP DISCLOSURE AFFIDAVIT  1. If the contract or business transaction is with a corporation, the full legal name a business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):  Names, Addresses, and Titles of Individual Who Will Lobby:  Full Legal Name  Address  Ownership				Plantati	on, FL 3	ئند
OWNERSHIP DISCLOSURE AFFIDAVIT  1. If the contract or business transaction is with a corporation, the full legal name a business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):  Names, Addresses, and Titles of Individual Who Will Lobby:  Full Legal Name  Address  Ownership	FEIN		<del></del>	20-373	3441	
1. If the contract or business transaction is with a corporation, the full legal name a business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):  Names, Addresses, and Titles of Individual Who Will Lobby:  Full Legal Name Address Ownership	State and date	of incorporation		Florida	03/69	
	If the cont business addre who directly o	ract or business trains s shall be provided indirectly holds fr	nsaction is with a officer a very percent (5%) or	nd director an more of the c	d each stockhole corporation's sto	der ck.
Molly Levy Plantation, Fl 100	1. If the cont business addre who directly o the contract or provided for er follows (Post 0	ract or business traiss shall be provided indirectly holds from business transaction ach trustee and each office addresses are	nsaction is with a of for each officer a ve percent (5%) or is with a trust, the beneficiary. All a not acceptable):	nd director and more of the content full name and such names are	d each stockhole corporation's sto and address shall	der ck. be
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	1. If the cont business addre who directly o the contract or provided for er follows (Post of Names, Addre	ract or business trainess shall be provided in indirectly holds from business transaction and trustee and each trustee and each office addresses are sses, and Titles of I Legal Name	nsaction is with a difference of ficer a very percent (5%) of n is with a trust, the beneficiary. All enot acceptable): Individual Who Ward Address	nd director and more of the case full name as such names are all Lobby:	d each stockhol- corporation's sto ad address shall ad address are as	der ck. be

2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable):						
Full Legal Name Ad	dress					
By: Muly Levy Print Name	Date: 11 / 23 / 09					
SUBSCRIBED AND SWORN TO or affirm NOV. 2009, by Molly personally known to me or has presented identification.	med before me this 23 day of  LEVY, he/she is  L/OL # 6/0055 7625080 as  Notary Public, State of Florida at Large					
	PAUL G. ASARINIS Print or Stamp of Notary  DD 722358  Serial Number  My Commission Expires: OCt 4, 2011					

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December 31, 2009

Mr. Giovanni Moss, Director Housing and Community Development Town of Davie 4700 Davie Road, Suite D Davie, Florida 33314

RE: Town of Davie NSP CDBG Agreement #10DB-4X-11-16-02-F08

Recommendations for Acquisition Services, Phase I Environmental

Dear Mr. Moss:

After review of the proposals received and the limited amount of time allotted to obligate all funds under the NSP program, Fred Fox Enterprises recommends the Town of Davie rotate service providers utilizing the two qualified bidders responding to the Request for Bids for Phase I Environmental Assessments Bid # B-09-152 providing the lowest price.

- 1. Land Design South of Florida Inc. in the amount of: \$ 850.00 per Phase I Environmental Assessment.
- 2. MS5L in the amount of: \$ 950.00 per Phase I Environmental Assessment.

If you have any questions please feel free to contact my office at (904) 810-5183.

Sincerely,

Fred D. Fox

Fred D. Fox Consultant